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"Non nobis solum sed toti mundo nati."

THE  
MEDICAL TREATMENT  
OF  
OUR TIME;  
OR,  
MEDICINE: ORTHODOX & HETERODOX.

BY ONE OF THE  
EXCOMMUNICATED

(John D. Hayward, M.D. Lond.).

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## PREFACE.

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THE competition in which this Essay has been crowned was invited by Major William Vaughan Morgan, who offered a Prize of Twenty-five Guineas for the best Essay on Medical Treatment, with special reference to the scientific system of Hahnemann. The adjudicators were Dr. Pope and Dr. Hughes, Members of the British Homœopathic Society; and Major Vaughan Morgan, Mr. Francis Bennoch, F.R.S.L., and Mr. Robert Palmer Harding, Members of the Board of Management of the London Homœopathic Hospital. Not less than thirteen Essays were sent in, and to the writer of the following Essay the Prize has been awarded.

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I have been asked to say a few words by way of preface; and I do so with the more readiness as the writer is a son of my esteemed friend, Dr. Hayward, and I am glad to welcome him as a follower in his father's footsteps.

The Essay is published with a view of bespeaking, it may be for the last time, a fair consideration on the part of the profession of the claims of homœopathy as a method, and of homœopathsists as brother practitioners. At present both one and the other are utterly

disregarded; they are simply refused a hearing. The laity who wish to be treated homœopathically when they are ill feel this a hardship. It is as their representative that Major Vaughan Morgan has offered the prize which Dr. J. D. Hayward has obtained; and it is on their behalf that his Essay is now circulated among medical men.

It seems to demand a patient hearing on their part. The account given of the existing modes of medical practice is surely a fair one; and what is there in these which should make men close their eyes to the prospect of something better? The exposition of homœopathy is one which all its followers would recognise as just; and what is there in it which should justify its being put out of court, and condemned unheard? Homœopathy is no novelty; it will soon be able to celebrate the centenary of its promulgation. It is no fancy of a few individuals, but the cherished conviction of some twelve thousand qualified medical practitioners throughout the world, which means nearly as many million adherents among the laity. It has a right to be heard on its own behalf by every physician who is concerned for the advancement of his art and the welfare of mankind.

And what are the claims it makes? To what practical conclusions should such an essay as this, if it win assent, compel its readers?

First, there should be a removal of all the barriers which at present restrain liberty of thought and action in the direction of homœopathy, by visiting it with loss of professional privileges. Ideas of orthodoxy and heresy, utterly out of place in medicine, should no longer be



allowed to influence its practitioners in their dealings one with another. Medical Associations must cease to exclude homœopathists as such, or to punish those who treat them as fellow-physicians. Consultations and co-operation, admission to medical societies and medical journals, must be determined on the merits of each case, and not be fettered by rules of any college, or refused on the mere ground of the holding of a yet unacknowledged creed. It is not so much for ourselves that we make these demands. We should certainly be happier, perhaps wiser, men, had we free intercourse with our profession at large; but our plea is not this. It is that by such artificial restrictions, such medical boycotting and trades-union outrages, there is a stifling of what possibly may be, and on substantial evidence claims to be, vital truth. The laity, for whose benefit all professions exist, cannot suffer this, which all must admit to be a risk, and multitudes believe to be a loss. The medical profession will do well to anticipate their requirement of perfect freedom in a matter which concerns them so deeply.

Secondly, homœopathy itself, as a method, must be acknowledged legitimate, and the question of its applicability to any case or form of disease must be an open one. Its principles and practice must have as patient hearing and as full discussion as any others, whenever its advocates can find opportunity of bringing them forward. We ask for no favour. If we are found dreamers or bores, there are plenty of ways of extinguishing us without violating liberty of speech; but at present we are silenced, not because we are fools, but because we are

homœopaths. Nor do we claim any exclusiveness for our method. Its application must always be a question of suitability and practicability; its range of action may be limited by the nature of the case, or by the deficiency of instruments with which to carry it out. We only ask that the question, Is this a case for the homœopathic method? should not be prejudged, but should be determined in each instance by reason and experience. Once set free the system and its adherents from all adventitious weights, and it will find its own true level, and take its due place—whatever that may be—among the resources of the art of healing.

I say that this may be the last appeal to the profession of this country for justice to homœopathy. Hitherto its advocates, when themselves medical men, have always addressed their fellow-practitioners. They have wished to carry these with them; and they have thought the interests of the public best served by seeking to influence the minds of their medical attendants. But such interests are, after all, paramount; and if they cannot be secured through the profession, they must be by more direct approaches. The word, *convertimus ad gentes*, may have to be heard again; and the outside world may have to enforce what now is asked in brotherly fashion of brethren. I, for one, hope that no such necessity may arise; and I wish this olive branch God-speed on its message of mutual understanding and goodwill.

RICHARD HUGHES.

*Brighton, November, 1886.*

# MEDICAL TREATMENT:

## ORTHODOX AND HETERODOX.

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BY ONE OF THE EXCOMMUNICATED.

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IN the following brief view of the treatment of disease in our own time, we shall confine our glance, as much as possible, to therapeutics in its restricted sense, that is to say, to the treatment of disease by the administration of drugs. Pathology, hygiene, dietetics, surgery, preventive medicine, and the discovery of the causes and origin of diseases, all influence largely the treatment of the various "ills that flesh is heir to;" these belong equally to all schools of medicine, and are available to and made use of by every worthy practitioner of the healing art; indeed, few diseases can be satisfactorily treated without attention to the rest and comfort of the body in general, and of the affected organs in particular, and without supervision of the food, air, and other surroundings of the patient, and of the mental and moral influences brought to bear upon him. In all these fields science has advanced and is advancing; lives are saved and deformities prevented or relieved by surgical proceedings which, even a few years ago, would have appeared incredible; the physiology and philosophy of food and hygiene are better understood and their laws more generally followed year by year; while in preventive and sanitary medicine, more especially, the present generation has made enormous strides in the prevention and cure of epidemic and sporadic disease. Of the importance of these branches of



the profession of medicine, all its members are agreed, and with the researches and discoveries therein all should be acquainted. When, however, we come to study purely medicinal treatment, or therapeutics, we find immense differences of opinion and practice prevailing; some physicians consider all drugs as useless or nearly so; some believe in specific remedies for a few diseases, and in palliatives for others, with a large residue of disorders in which no medicines have as yet been shown to afford any benefit. A large class believe in the power of drugs to cure or beneficially modify the majority of diseases, but this class is again divided upon the question whether such practice is directed by any rule or rules, or whether empiricism is the only guide to be followed in the selection of drugs for the treatment of disease; the remedy being administered on some recorded authority or tradition by whom or in which it has been asserted or proved to benefit a similar case to that present. Even amongst those who believe there to be some definite relation between drug action and the diseases benefited thereby, there is considerable difference of opinion as to the relation which does exist; numerous theories and rules for practice have been advanced and have subsequently died away, and at the present day only two large classes have any considerable number of adherents, those, namely, which will subsequently be described as the HOMŒOPATHIC and ALLOPATHIC schools.

In a short essay such as this it will be impossible to do more than sketch the different modes of treatment of the day, while instances and arguments can be only sparingly employed: for these, reference must be made to medical literature. As regards the homœopathic school, the reader is directed to the writings of Samuel Hahnemann and to current homœopathic literature.

While the divergent views to which allusion has been made are so numerous in their varieties as to have given rise to the statement that, in any particular case, one can obtain as many different opinions as doctors, and has caused the difference of doctors to become a proverb, it would be a matter of surprise if the supporters of any one set of opinions were to arrogate the title of orthodox, and were to consider their decisions as coming *ex cathedrâ*; and such is not the case; nevertheless, the believers in and the practitioners of one system have been selected as being *heterodox*, pure and simple, the

followers of this particular rule of practice being *anathema*, while all others are the elect. Bishop Warburton's definition has been modified: "Heterodoxy is homœopathy, orthodoxy is every other man's doxy." This small but increasing band is to be driven from all social and professional intercourse, from public appointments, honours, hospitals, and journals, the intelligence and motives of its adherents are to be condemned, although, as a matter of fact (so much has the pestilent heresy affected the true church), greater divergencies of opinion and practice exist among the members of the majority, than between some of these and the persecuted sect.

*The Medicine of To-day.*—In considering the medical treatment of the present day, we shall leave homœopathy until we have first described the therapeutics of those outside its fold. The great variety of the methods practised renders it impossible to state what *the* medicine of the day really is. The majority of plans of treatment may, however, be included in a few classes.

*Expectancy.*—If by the term present-day medicine we mean the practice of the more eminent and honoured members of the profession, perhaps that which has been called "Expectancy" may have the best claim to the title. This system, or rather absence of system, embraces those who consider drugs, with few exceptions, to be of little use in relieving disease. They are sceptical of the existence of any therapeutic law; they may prescribe opium to relieve pain, quinine in pyrexia, the bromides in spasmodic nervous affections, and other palliatives, though many of them hesitate to prescribe even these, recognising the seriousness of the aggravation which so commonly follows the temporary relief they afford. They endeavour to give harmless drugs in a pleasant form, employ effervescent, syrups, natural waters, and similar expedients. If unable to do any good in this way they hope to do no harm by drug administration. Recognising the popular desire for physic, and the common faith in its efficacy, they pander to a belief they do not share, with the object of amusing the patient, while nature cures the disease. They are seldom unwilling to receive credit for the recovery when this takes place; where the result is less satisfactory, they can, at least, smooth the way to death, and philosophically accept whatever fate decrees. As a writer in *The Practitioner* boasts, concerning this class of physicians, they practise "physiologica



medicine, characterised by a strong belief in the sanative powers—the *vis medicatrix*—of nature and very great scepticism as regards the utility of drugs. It takes care of, supports, and amuses the patient, while nature cures his disease. It makes much of diagnosis, and admits the existence of a few specifics.” Some of the most eminent men of the profession confess their theoretical disbelief in benefit from drugs. Dr. Wilkes said: “So far from the doctor depending upon physic for his success, he never takes so high a position as when he gives none, and makes the friends of the patient stand aloof and rely upon his superior knowledge;” and another teacher informed his class that drugs were to be employed merely as “aids to faith in the weary time.”

Of course all must feel it to be a sad thing if, after all the labours of scientific physicians for so many years, therapeutics is really in the barren condition which these men believe, while all other branches of science—and even of medical science—have been making such enormous advances.

The new school repudiate this medical nihilism, and believe drugs properly used to be the most important agents that can be employed in the restoration to health. This expectant school have at least the courage to avoid doing harm; they are wise and brave enough to refuse to be “heroic;” and their teaching and practice has had a beneficial effect on the profession, by demonstrating the uselessness, and worse than uselessness, of the drugging upon which so many of them relied. The best of those men whose conduct, in the face of disease, consists chiefly of expectancy, have no inconsiderable success; the few specifics they know they employ well; they use palliatives judiciously; they remove the causes of disease, where these are obvious, and are capable of removal; they do not interfere violently with nature’s efforts to recovery; but devote their attention to the food, climate, clothing, comfort, and other surroundings of the patient, exercising a benevolent supervision over the return to health. In many cases the means they employ are all that is necessary for the cure, and in others they determine the balance in favour of recovery, where unaided nature could not have done so. The general profession was astonished to find that the results of this comparatively do-nothing plan of treatment were so much better than those of active allopathic or palliative measures; but, many

years ago, Hahnemann wrote : When a patient gets well during allopathic treatment, “ he would have been equally cured without any remedy ; he would have been cured in the same space of time, because palliatives never shorten the natural period of acute diseases,” while they intensify the condition of chronic affections or add another, a drug disease, thereto.

*Eclecticism.*—A better system is followed by a smaller but increasing number of physicians. These men are empirics in the better sense of the term ; they adopt any kind of treatment which commends itself to their reason and experience, from whatever source it emanates, or however it may contrast with the ordinary methods in use ; they repudiate the term allopath as strongly as homœopath ; they practise no “ pathy,” and are, in reality, what they are often called, eclectics. These men endeavour to show as little intolerance as the majority of the profession will permit to the new school of medicine ; privately they often express their sympathy with its followers, and discuss the real value of their treatment, often adopting a good deal from the teachings so received. From these physicians converts to homœopathy are frequently made. Some of them admit the truth of the law, *similia similibus curantur*, but believe its application to be very limited, and that other laws of therapeutics are equally useful ; they practise expectancy in some cases, and use specifics (so called) in others ; they practise allopathy in a mild form in a large number of cases, and homœopathy in others ; they form the majority of those who, as we shall see later, re-discover (!) what homœopathy has long known, and introduce to the general public therapeutic measures derived from homœopathy, and although in but few cases do they acknowledge the source of their inspiration, they readily accept credit for the success of the methods they adopt. In this band of men is the chief hope for the gradual preparation of the great body of the profession for the adoption of homœopathy, and the recognition of its therapeutic rule, by winning them from their palliative proceedings, and accustoming them to small doses, which they cannot fail to see act homœopathically.

In general practice these men are good and successful practitioners, and “ if not the first in the very front rank,” some of them are professors pursuing studies in pharmacology and therapeutics of great value in the development of the *materia*



*medica*, and most of them recognise the importance of experimenting with drugs upon persons in health. Among the more distinguished writers in this class are Ringer, Ross, Brunton, Phillips and Murrell, who are, as Dr. Wilks says, "the most scientific men in the profession." The majority of these scientific empirics acknowledge no general relation between drug action on the healthy body and on disease; they allow that many drugs act in contrary directions in large and in small doses, and they use these remedies in different doses in order to avail themselves of these contrary actions, often employing doses so minute that at first their followers must experience the shivers of homœopathy; they believe, with Hippocrates, that "some diseases are best cured by similars, some by contraries;" but, in the main, their practice is based on the tradition or experience of what did or did not do good in a similar case to the one before them. Of all old school treatments eclecticism has most claim to the title of 'Rational' (a name, however, arrogated by the average palliative prescribers in the profession); its professors act as bell-wethers to the unthinking flocks of the medical body: sometimes they lead these flocks to the fruitful pastures of homœopathy; but the professional reader will remember the devious paths into which, even in recent times, the rabble have passed rejoicing, only to return lamenting; the salicylic craze being one of the latest and most obstinate of these fashions in medicine.

Eclectics prescribe few drugs at a time, frequently only a single remedy, and that in a small or even minute dose, indeed, some of them are as homœopathic as many who are so called.

*Allopathy and Antipathy.*—These systems include the bulk of the practice of the greater number of practitioners, especially of the less intelligent, the lower average medical man; combined, these methods form the true palliative as opposed to a curative system, and to this combination the name *Allopathy* is usually given. In cases where the cause of the disease cannot be discovered or cannot be removed, allopaths, after rendering the patient's surroundings favourable, employ drugs for the purpose of alleviating his prominent symptoms, such as pain or sleeplessness, by drugs which physiologically force their cessation until the drug influence passes off, or medicines which produce an opposite pathological condition; thus leaving untreated the disease as a whole, and inflicting on the patient a drug disease in addition to

that he already has; this is the *antipathic* method. The true *allopathic* principle is, that a disease may be removed by setting up a morbid process in some other tissue or organ, the action of the drug causing the cessation of the original disease by derivation, substitution, or counter-irritation, as it is called, or by relieving and resting the diseased organ by forcing some other to fulfil part of the function commonly performed by the one disordered. The principle *contraria contrariis curentur* underlies both these methods, the former (antipathy) translating it, "let diseases be treated by contraries," the latter (allopathy) substituting "by unlikes." Undoubtedly a disease may sometimes be removed by setting up a morbid process in some part of the body, or by forcing a physiological function to activity; diaphoretics, diuretics, purgatives, counter-irritants, and similar classes of drugs, facilitate recovery from some acute and subacute disorders in this substitutive manner; but, since Hahnemann's discovery, a much better method is before the profession, one not requiring the causation of a drug disease which may prove more important and more difficult to remove than the primary disorder, one which cures more certainly and far more safely and quickly; and not merely *alleviates* for a few hours, leaving the primary disease increased by the inevitable drug reaction. Hahnemann shows how impossible it is to cure chronic disease by palliative treatment, and how difficult it is to cure the morbid states produced by the drug so used. Many years previously Hippocrates wrote: "Two things must be carefully attempted in disease—to cure, and, at all events, not to injure the patient." Antipathy is the simplest and frequently the most harmful variety of allopathy, and in it the reaction which the body evidences to the influence of large doses of drugs adds most markedly to the intensification of the original morbid symptoms. Some allopathic physicians lean more to the substitutive method, some to the directly contrary plan. Allopaths in general make great and constant use of purgatives, emetics, counter-irritants, and external and local applications, and a large number of remedies, employed somewhat indiscriminately, are classed under such vague terms as "tonics" and "alteratives."

The term "allopath" is in common use for denoting all who do not practise homœopathy. This is manifestly wrong. Few medical men now-a-days practise exclusively on this principle, and most make occasional use of it. Those to whom it should



be limited are the practitioners whose routine practice is governed by its principle, a large but decreasing proportion of the profession. Many who are designated "allopath" repudiate the title, and consider its principle of only limited applicability. As a law, they regard it of no more value than the law of similars, believing neither to be of extensive use.

Some practitioners adhere to the old drugging system, especially men who finished their medical education many years ago. They use large or "heroic" doses; they attack disease on the plan of kill or cure; they practise polypharmacy; generally commence all treatment with a purge, clear out the *primæ viæ*, as they term it. These practise allopathy in its worst form, and generally do as much harm as their opportunities admit of. These men often boast of their "heroic" treatment, as though there was something courageous in their proceedings, and as if all the heroism displayed were not confined to their patients. They are, however, out of date; time is lessening their numbers more than the result of their submitting to the same treatment themselves, for this they are generally not heroic enough to do; homœopathy, public opinion, and other causes, prevent their having many followers. In the practice of these men we may get an idea of what methods Hahnemann had to contend against. They have learned nothing by recent advances in therapeutics, and, worse still, they have forgotten nothing; they blister, purge, salivate, and give emetics as did their ancestors, and cast longing eyes to the lancet and to setons, which only the dread of an enlightened public opinion prevents them from making indiscriminate use of.

When to the preceding classes of practitioners we add those who make hydropathy, antiseptics, alcohol, the hunting down of bacilli (real or imaginary), electricity, or some other agent, each admirable for suitable cases, the panacea for most diseases which present themselves, we may imagine the difficulty there is in considering what the medical treatment of the day really is. Most physicians have their own "fads" and "tips," few practise on any system, nearly all occasionally use each of the preceding methods. There is, however, a certain average treatment mainly allopathic, and not favouring extreme practice, either in the use, abuse, or abstention from the employment of drugs. It embraces few drugs in the prescription, and makes good use of treatment otherwise than medicinal. This, whether we call it



rational or empirical, may be accepted as a favourable specimen of old school treatment or comparison with the system which still remains to be described, and which we take leave to call the *medicine of the future*.

*Homœopathy*.—The principles of homœopathy are simple, its doctrines are easily learned, and their truth can be tested day by day; albeit for the practical application thereof hard and continued study is required for the acquisition of an intimate acquaintance with the actions of drugs on the human body in health. The *materia medica* is large because of the number of drugs employed, and because the mode of investigating the comprehensive actions each is capable of, and the circumstances surrounding such actions, are taken into account. It is not merely some marked characteristic such as a power to purge, or to vomit, or to narcotise, that is recorded. Here is the laborious part of the study and practice of homœopathy. The numerous symptoms which indicate the actions of drugs are contained in works on pharmacology and therapeutics, while repertories or indices of these symptoms do much to facilitate their practical application.

The principles themselves may be briefly stated as follows:—

(1) *The Law*.—The basis of the system is that therapeutic law which, although hinted at before his time, was first definitely enunciated and proved to be of general application by Samuel Hahnemann in 1796: *similia similibus curantur*—likes are cured by likes; from which arises the rule of practice: *similia similibus curentur*—let likes be treated with likes. This law asserts that diseases are removed most certainly, quickly, safely, and effectually by small doses of those drugs which, in more material quantities, and in healthy persons, produce symptoms similar to those manifested by the disease to be cured. The use of this *specific* action, which is the exception in old-school medicine, is the rule in homœopathy, which has accordingly been described as the “medicine of specifics.” The principle was first suggested to Hahnemann in 1790, by the observation that attacks similar to those which occurred in ague might be produced by large doses of cinchona bark, which, as was well known, was a potent remedy in this disease. This fact suggested other instances to him where a similar relation existed between the action of drugs and the diseases relieved by them. From numerous books and experi-

ments Hahnemann collected a sufficient number of such instances to justify him in formulating the law, from which the small dose, single remedy, and the whole fabric of homœopathy developed as corollaries, and were announced in the *Organon of the Healing Art*, in 1810. The principle has been applied to the prevention, as well as the cure, of disease; e.g., vaccinia—a very similar affection—is the preventive of small-pox; and belladonna has been demonstrated to prevent the infection of, as well as hasten recovery from, scarlet fever.

(2) *Provings of Drugs on the Healthy*.—To apply this law in general practice it is necessary that experiments should be made with the various drugs on persons in health, in order to find the organs and tissues upon which each drug specially acts, and to discover the symptoms each drug can produce. This has to a very large extent been done. Drugs have been proved or tested on the healthy; the records from these experiments, together with the accounts of cases of poisoning, venomous bites, and *post mortem* examinations, are collected and arranged to form the drug pathogeneses, the tools to be used, according to the therapeutic rule, against diseases evidencing similar symptoms and pathological changes. Many writers on therapeutics, both before and since Hahnemann's day, have recommended that to discover the true actions of drugs they must be tested on the healthy body; but the proposal owes its definite introduction to Hahnemann, and the results can only be of much value when applied in harmony with the law of similars.

3. *The Dose*.—The law of similars is the characteristic of homœopathy, and its application is, within certain limits, independent of the size of dose used. The employment of the comparatively small doses is a result of practice and experience; it was not originally a prominent feature of, nor is it essential to, the system. Hahnemann practised first with material doses, and the use of doses gradually smaller and smaller was the outcome of patient trial.

The question of the dose to be employed has, however, been the great stumbling block to the more general adoption of homœopathy. On the small doses used by homœopaths have been poured the ridicule and contempt of the profession, while the investigator of the system is repelled at the outset by the shock to his preconceived ideas of the powerlessness of such small amounts of drugs



to influence health or disease. The “infinitesimal” doses, as they have been called, are not universally employed by homœopaths; the size of the dose which acts best must be determined by experience for each remedy. A suitable dose is one which is too small to increase the symptoms of the patient and at the same time is large enough to cure his disease. The so-called “manifestation of drug-action” on our patients is the opprobrium of therapeutics; to cure safely and quickly ought to be the only manifestation required. Most old-school physicians devote their attention more to influencing the patient’s system than his disease. That drugs will purge, sweat, cause diuresis and vomiting has long been known, and does not need demonstration upon each patient who presents himself; to ring these changes on each sufferer was the aim of each physician until Hahnemann showed that diseases might be removed more certainly and more safely without any such drastic and dangerous drug effects being produced. Medical men require to have their attention much more carefully drawn to the results minute doses of medicines can effect, than has hitherto been done in the text-books and lectures on *materia medica*, in order to prepare them for the recognition of their value in practice. The doses quoted in the books, and relied on by the student’s teachers and fellow practitioners, lead him to the instinctive opinion that considerably smaller doses, even when used after another method, must be inoperative, and that homœopathy is, therefore, if not harmful, at least on the same level as the do-nothing, or expectant, system of treatment, and that its pretension of power is a delusion which deserves reprobation. However, the power of what may almost be called infinitesimal doses, so minute are they, is now becoming recognised by the profession. Whatever objections there may be to the extreme practice of some physicians, there can be no doubt that if the name “infinitesimal” be used to denote exceedingly minute portions, independent of any theory, the practice of using such is spreading throughout the profession, and their power to produce and cure bodily disorders is becoming widely recognised. The potency of minute doses of arsenic, corrosive sublimate, atropine, digitalis, and many other drugs, is generally admitted. *The British Pharmacopœia* now contains directions for the preparation of discs, each to contain 1·5000th of a grain of atropia, and eye-lotions containing one part of corrosive sublimate to 50,000 of water are

in common use. Practising physicians employ smaller doses than the books advise, and therapeutic professors less than they have taught. *The intelligent progress is towards small doses.*

In his experiments on the frog's heart, Professor Fraser found that solutions of digitalis of one part in 100,000 produced characteristic changes ; while of strophanthin, "the almost inconceivably minute dose which was brought into contact with the heart when a solution of one part in 6,000,000 of strophanthin was used, produced complete stoppage of the heart's actions in extreme systole in about twenty minutes." Darwin writes that 120,000,000th of a grain of phosphate of ammonia will affect the glands of the sundew. If such minute amounts can cause symptoms, what is there ridiculous in the idea that they can cure them ?

Again, in addition to considering the actual size of the dose employed, the condition in which the drug is presented must be noticed. The fine division and repeated administration enable the remedy to exert all its powers. As has been frequently instanced, large quantities of metallic mercury may be ingested with little effect, a small fraction of which would salivate and purge a number of persons if finely divided. Attention must also be directed to the fact that drugs used homœopathically act on a constitution peculiarly sensitive to their action ; the patient so treated is in the position of one who has an idiosyncrasy for the particular drug employed, if it be suitable to his case, and the influence of minute—*i.e.*, homœopathic—doses acting on beings so predisposed is marvellous. Again, in homœopathy the drug action is in the direction of the return to physiological health, one in which nature is already striving. The drugs, also, are those whose action is directly on the diseased organ or tissue ; a less dose, therefore, is advisable than where healthy organs are being attacked, as in the purgative, diaphoretic, diuretic, and other derivative allopathic measures. A large dose used homœopathically would do more harm than when used allopathically, because in the former case it would be acting directly upon the already affected organ, and in the same direction as the disease present, intensifying instead of relieving it, as the small dose does. If, as we have seen, minute doses can cause disordered action, and on experience we find they can cure, why should larger be used ? The rule of practice, however, having been



accepted, the question of the best dose must be determined by the constitution of the patient, the nature of the disease present, the particular drug to be used, and other considerations ; experience is the guide. Further, only one remedy must be used at a time ; homœopathy rejects the mixing of drugs in the prescription as unscientific and unwise. When homœopathy is mentioned it is commonly some extreme views that are discussed and ridiculed ; this is manifestly unfair : or passages in some of Hahnemann's writings are singled out, torn from their context, emphasised and laughed at, to the neglect of that which is true and valuable. The condition of etiology and pathology in Hahnemann's time was too imperfect to preclude lapses into errors, which men who would not have been fit to wash his bottles nowadays attempt to correct. This is natural in the progress of science, and many of the treasured doctrines of to-day will appear still more absurd to posterity.

It is to be noticed also that the different names for drugs and the different methods of dispensing from those commonly adopted are not essential to homœopathy, they are the result of Hahnemann's intention, a wise one, of making his system as distinct as possible from the medical practice around him.

Unsatisfactory as is the allopathic therapeutics of to-day—and the profession acknowledge that this department is their opprobrium, although they decline to investigate the better way—a glance at the literature and medical records of the Hahnemannic period will show how much worse was general practice at that time. When we notice the immense change which has come over medical treatment in the last half century ; a change so great that such an absurdity has been gravely announced as that the type of disease has changed during this period, and that it has been argued therefrom that, therefore, treatment which was suitable fifty years ago has consequently become harmful ; we may get some idea of the debt the profession and the world owe to this remarkable man. Disease has, indeed, changed its type, but this is the *result* not the *cause* of the change of treatment ; the “type” is even more changed in the patients of homœopathic practitioners. In addition to the system called homœopathy, a large number of the changes for the better in general old-school practice are due to Hahnemann's influence, to his writings, and to the system he formulated. Him they have cast into the pit,



but his raiment they have divided amongst them, though the new pieces in their old garments often betray (by their success and the law they follow) the source whence they came.

*Law in Therapeutics.*—Before proceeding to a comparison of the methods of treatment already mentioned, we will briefly consider the question of the existence of therapeutic laws.

Without laying much stress upon it as an argument it is necessary here to allude to the reasoning of Hahnemann and some of his followers, that it is natural to conclude that the Almighty must have provided, in nature, remedies for the afflictions of His children, just as He has provided for all their other wants. Reasoning from analogy, since there are laws for all other natural phenomena, the discovery of which is progressing year by year, since the functions, growth, and repair of the healthy body follow definite laws, it is only rational to conclude that there must be laws for the diseased body and for the means at our disposal for its direction back to health. By analogy, therefore, there is nothing strained in the supposition that a beneficent Creator, whose other works are governed by laws discoverable in great part by man, should impress similar rules upon the treatment of disease. The great variety in the phenomena evidenced by disease and by the actions of drugs need not cause despair of the discovery of the relation between them. Other phenomena, now reduced to simple laws, have seemed just as complex in their time; meteorologists confidently expect to reduce the complex manifestations included under the term “weather” to definite laws. *A priori*, there is nothing improbable in laws, or even in a universal geometrical law (in the scientific sense) for the relation between different diseases and different drugs. An important law of this class has, we assert, been discovered by Hahnemann; it is of very general application, though we do not deny that it may be a part of some law, still hidden, of more universal application. This particular law depends for its proof, as do all laws, upon the experience that it agrees with the numerous isolated phenomena which occur. Deductively, it must be tested, though it was inductively discovered, as most laws have been, and must be. Hahnemann noticed the cure of ague by chinchona; this single instance suggested a law, which, by further examination, he found to be general; just as Newton and Galileo drew conclusions

from the falling apple and the swinging lamp. A rule which in practice enables predictions of unexpected phenomena to be made must be a law of nature, and Hahnemann's rule satisfies this test. Drugs which have been suggested by this rule have over and over again proved so "specific" for the several diseases in which they were given, as to have forced their unwilling adoption upon the general medical body; and homœopaths find instances of such predictions of indefinite extension.

That diseases follow definite laws is generally acknowledged; on such laws etiology, pathology, diagnosis, prognosis and treatment are founded; that the actions of drugs on the body follow laws is the basis of pharmacology and toxicology; the question in dispute is whether a definite relation exists between these classes of phenomena and their laws, and if so whether this relation is the one expressed in the homœopathic formula.

That there is a contrariety between the primary and secondary effects of medicines, and that, in the case of a considerable number of drugs, large and small doses act on the body and its functions in opposite manners, are becoming more and more generally recognised as therapeutic laws. The former of these laws was hinted at by Paracelsus, and was more clearly seen by Boerhaave and Cullen, but both were first definitely enunciated, first emphasised, and first practically applied by Samuel Hahnemann. Upon the principles of the double action of drugs, of the opposite results of the employment of large and small doses, and of the organopathic or special local affinity of different drugs for different organs and tissues, Hahnemann's system of practice is based. That these principles are expressions for therapeutic facts is undeniable, all scientific pharmacologists make use of them. We contend that homœopathy is the logical outcome of the acceptance of these principles, and of their application in practice, and for the proof of its worth we appeal to experiment and experience. These laws were applied by Hahnemann, so as to found a method for the discovery of drugs to cure the various diseases which afflict humanity; from the results of further observation he declared that *similia similibus curantur* was another therapeutic law, and offered it as a guide to drug selection. This experience has demonstrated the best therapeutic rule before the profession, though possibly it is but a part of some more universal



generalisation, some deeper and perhaps simpler natural laws, as yet undiscovered.

*Homœopathy compared with other Methods of Treatment.*—The importance of fairly investigating the system of therapeutics termed homœopathy must be acknowledged, when we consider that thousands of physicians in all parts of the world openly confess that this method is the basis of their daily practice, while the number of these practitioners and of their clients is constantly increasing.

It is announced that there is a system for the administration of remedies to disease of general application, and giving much better results than any other; that, while those who adopt it embrace everything of practical value in general use by all physicians, it points to a method of selection of remedies which infinitely increases the value of the *materia medica*, and elevates therapeutics from being the disgrace of the art of medicine to the position of its most useful instrument.

Regarding, then, homœopathy as the simple application to cases of disease, as they come before us, of the specific action of drugs on the human body by means of the rule, “let likes be treated by likes,” and bearing in mind the necessary rider to this proposition, that the remedies must be used in such doses as, while not acting injuriously on the patient, are sufficient to remove disease safely and simply, not disturbing the physiological, but correcting the pathological condition; let us consider how we are to compare such a plan with others, so as to estimate its relative value. Two ways present themselves: first and most important is that by practical experience and its results as these are expressed in statistics; and, secondly, by argument.

(1.) *Experience and Statistics.*—Homœopathy has now been long enough before the world for it to have become possible, by the careful examination and comparison of isolated and of collected cases under observation in hospitals, dispensaries, and general practice, to compare its results with those of other treatments. Comparison by results is at all time difficult in medicine, on account of the variable factors in the cases observed, such as the different surroundings, nursing, climate, time of year, nature of epidemic, age, race, and class of patients, and so forth; but where, as in this country, homœopathy has, at present, only one hospital of importance, comparison becomes still more difficult.

In America, however, it is easy to compare the systems broadly and fairly, and, in that country, large collections of facts have over and over again demonstrated that homœopathy is superior to all other therapeutic methods. In private practice, of course, comparison by results is extremely difficult, except by each physician for himself and in his own cases ; but even in general practice the new system has demonstrated its superiority, especially in chronic diseases, and popularity with the public must be counted for something. In most large towns homœopathic dispensaries exist, and are largely visited by people of a class who judge solely by results, who would not go where they had not some reason for believing benefit was received ; who are free from any delusion or deception, especially where institutions affording old-school treatment could be so much more easily, cheaply, and readily made use of.

Therefore, without placing undue reliance on statistics, we must quote some unimpeachable facts, which should have weight in these days of collective investigation.

Professor Henderson, in a paper on pneumonia, in *The British Journal of Homœopathy* for 1852, compares a large series of unselected cases of pneumonia under various methods of treatment ; a reference to this paper will demonstrate how carefully and scientifically the comparison is made, and how just is the Professor's conclusion that it " places beyond all rational doubt the claim of homœopathy to a very high degree of active curative power in pneumonia." Of the cases treated homœopathically 6 per cent. died, and the duration of illness was  $11\frac{2}{3}$  days ; of those treated by venesection 20·4 per cent. died, and of the rest the average duration of illness was 35 days ; of those where tartar emetic was relied on, the mortality was 20·7 per cent., and the duration in recovered cases 28·9 days ; where no medicine was used and no blood removed, only 7·4 per cent. died, but the average period of the disease was 28 days.

M. Tessier practised homœopathically at l' Hôpital Beaujon, in Paris, where no selection was possible in the cases sent to him and those referred to his allopathic colleagues, yet his patients had a mortality of 2·48 per cent. less than theirs, and the duration of illness was so much shorter that he received nine more patients per annum for each bed than they did.

M. Liagre, physician to the general hospital at Roubaix, in France, adopted the homœopathic system of therapeutics during



his period of office with a diminished mortality of 7 per cent. and an increased admission of over 30 per cent.

Dr. Routh, in his "Fallacies of Homœopathy," gives the following, among other comparisons gathered from literature :—

	Homœopathic treatment. Deaths per cent.		Allopathic treatment. Deaths per cent.
Pneumonia.....	5·7	.....	24
Pleurisy .....	3	.....	13
Peritonitis .....	4	.....	13
Dysentery .....	3	.....	22
All diseases .....	4	.....	10·5

In America, several institutions have been alternately under allopathic and homœopathic rule, and the results have in many instances been accurately tabulated and compared, to the great advantage of the new school (vide *Monthly Homœopathic Review*, vol. xxviii. p. 534, and vol. xxix. p. 609). In Arapahoe County, Colorado, the Medical Department was turned over to the homœopathic school for one year, and the results occur in the public records of the county. During the year ending March 31, 1883, the medical officer of the public hospital, the poor-house hospital, and the gaol hospital of Arapahoe County, in the State of Colorado, was an opponent of homœopathy. During that year there came under his care in these institutions 1,534 cases; of these 79 died. During the following year the medical officer was what in common parlance is called a homœopath. He had 1,764 cases and 43 deaths; that is to say, he had 180 more sick people under his care and 36 fewer deaths, or but little more than half as many. The cost of each patient treated homœopathically was at the rate of 9 dols. 66 cents., and of those treated otherwise it was at the rate of 12 dols. 75 cents. These statements were published in America in 1884, and it was perfectly within the power of anyone to examine the books containing the hospital records, and to refute them if he could.

In New York, in 1854, one of the orphan asylums was treated homœopathically, and its mortality was less than the others in the proportion of 1 to 3

Of the enormous saving of life brought about by the homœopathic treatment of cholera, the general public, and even a part of the general profession, is aware, so certainly, indeed, has this been



demonstrated, that the attention of Parliament has been drawn thereto. Statistics from Russia, America, Hungary, Vienna, France, Egypt, and India; and from epidemics in Great Britain and elsewhere, all tell the same tale; while cases treated by camphor alone (the homœopathic remedy for suitable cases, as originally indicated by Hahnemann) without the attention of any physician, have done much better than those under allopathic care. In many places even general medicine now-a-days resorts to camphor, arsenic, veratrum, castor oil, and copper salts, in cholera epidemics. The source of the inspiration leading to this is evident. In one epidemic of cholera recorded in Vienna the homœopathic death rate was 33 per cent., while of those otherwise treated 66 per cent. perished; in 1866, in Liverpool, the deaths were: under homœopathy 15 per cent.; treated with castor oil which to a large extent is homœopathic to the condition constituting cholera, 30 per cent.; under old-school treatment, 71 per cent.

In Vienna, at the Gumpendorf Hospital, under Dr. Fleischmann, the results of the treatment of cholera were so much better than in the other hospitals as to lead to the repeal of the edict against homœopathy. At the London Homœopathic Hospital in 1854, the mortality was 16·4 per cent., and the cases were reported on as true cholera by a medical inspector of the Board of Health. In 1881, an epidemic of typhoid fever broke out at Müller's Orphanage Bristol, in which 80 cases were treated homœopathically and all recovered. The ordinary mortality of this disease is 14 per cent.

In epidemics of typhus fever and of yellow fever it has been proved that homœopathy saves over 10 and 60 per cent. respectively of lives which are lost under the other methods employed. In dysentery and other diseases similar results have been published, with references for their authority. (Consult *Monthly Homœopathic Review*, 1880, p. 54; and 1886, p. 56, where remarkable contrasts occur.)

At Ward's Island Hospital, New York, solely under the care of physicians practising homœopathy, there were, during 1876, 3,077 cases admitted, with a mortality of 6·07 per cent. At Bellevue Hospital, where the medical officers repudiate homœopathy, there were, during the same year, 5,651 cases, with a mortality of 12·5 per cent.; and at Blackwell's Island Hospital, under similar management, 8,621 cases were admitted, with a mortality of 12·3 per cent. It is interesting also to note that the cost of

alcohol per head in the first hospital was 3 cents and one-sixth, and in the two others  $34\frac{1}{2}$  cents ; while the expense of drugs was  $43\frac{1}{2}$  cents per head in the first, and 1 dollar 46 cents in the last two.

In 1880, Mr. Hughes, the Treasurer of the Temperance Hospital, stated that the mortality in that institution was lower than that of any similar institution in the metropolis, *except the London Homœopathic Hospital*.

Of course such statistics may be impugned. It may be asserted that they have been wilfully falsified, and only favourable specimens presented ; or the diagnosis of the cases so tabulated may be suspected. Astonished by the brilliant results recorded of homœopathic treatment, there have not been wanting writers to make both these accusations. The wonderful success of the new system has, however, been too plain and evident for such plans to carry much weight ; even though rapid cures of diphtheria, cholera, dysentery, and pneumonia have been stigmatised as recoveries from ulcerated throats, simple diarrhoea, and catarrh. Again, the absurdity of calling membranous sore throat "diphtheria" only when the patient narrowly escapes with life, and after a distressing and tedious illness under old treatment ; of asserting cholera to be "true" only when a great majority of those attacked die ; of calling tonsillar inflammation "quinsy" only where prolonged swelling or abscess results ; of refusing the name "dysentery" to cases which are recovered from rapidly, and in a large proportion of cases, has been again and again pointed out. To recall the diagnosis in cases of hydrophobia, tetanus, cancer, locomotor ataxy, and declare them spurious unless the course is steadily on to death, is hopeless and illogical. The authenticity of the above, and similar statistics, can be, and has been proved whenever challenged. With regard to some of them, Sir John Forbes wrote in his "Nature and Art:" "I do not think the truth of these results, as far as regards mortality and recovery, ought to be or can be denied." And Dr. Inman, a distinguished lecturer on medicine, writes: "Hahnemann and his followers were able to demonstrate that they had the advantage over the older school of medicine, both in reduced mortality and duration of illness."

Medicine is a science of experience, and success in treatment is the test of value. Whether theory and argument favour



homœopathy, or the reverse, the system is content to be judged by its works ; ridicule, as applied to its deeds, its principles, or its doses, will not determine their worth—*solvitur ambulando*.

(2) In *comparing* the various methods of treatment practised at the present day their variety presents a difficulty. Homœopathy is a fairly distinct system, but outside its pale multitudinous plans exist between the extremes of heroic drugging and of pure expectancy.

And first it must be noticed that attention to the surroundings of the patient, and the removal of the cause of the disorder where possible, are just as much the object of the homœopathic as of any other physician. The average old-school physician is apt to boast that it is his especial aim to remove the cause, and hence the particular claim he asserts to the title “rational.” *Tolle causam* is a direction which is appreciated by the homœopathist fully as much as it is by his non-homœopathic professional brethren, though he may believe that in the present condition of medical science the aphorism is not of such general application as many imagine. Even where the cause of the disease present is definitely known, the homœopathist believes that if this cause be *internal*, such as determination of blood, unnatural muscular action, extravasation of fluids, and so on, it is generally most quickly and safely removed by using a drug which will produce in the healthy similar symptoms, or a similar pathological condition, to those presented ; while if the origin be *external*, such as sewer gas, infectious germs, and irritants of all kinds, he minimises and shortens their action on the system, and removes the effects by drugs, which act in a similar manner when ingested in material doses. In doing so he contrasts with those who rely on effects produced upon other organs and tissues to those diseased. Those members of the old school who speak so much about the removal of the cause in reality base a large part of their practice on the absurd reversal of their motto, viz., that to remove or hide the result is to cure the cause. They palliate the chief symptoms present, trusting to nature to remove the cause or condition precedent while they deaden the effect, though such action on their part often prevents this removal, or even increases the disorder by exciting a reaction against their interference. “Profound and ingenious policy ! Instead of curing the disease to remove those symptoms by which alone its nature can be known ! To leave

the serpent his deadly sting, and deprive him only of his warning rattle.” \*

In each case as it presents itself the pathological condition at the bottom of the disease will first be sought for as indicated by the patient's symptoms. It has been made a reproach to homœopathists, that they study the symptoms of their cases to the neglect of their pathology. This is only partially true; this school regards symptoms as of more importance in comparison with any *theoretical* pathology than do old-school professors. Homœopathists regard objective and subjective symptoms as the special indications for drug treatment; they are the signs by which the disordered tissues and organs manifest themselves, and that treatment which removes them certainly and safely must cure the condition producing them, and probably by acting on the cause of them. Homœopathists do not disregard the pathology of disease, but insist on each patient being treated individually, and on no routine being practised on the basis of a generic name; they follow Hahnemann's dictum: “Collect the totality of the symptoms, and cling to the essential and characteristic,” less regard being paid to those which are merely coincident or sympathetic.

The primary cause of a disease being discovered and removed, the effects will very frequently cease, and such treatment we consider superior to any pathies as an indication for the first attention to a case; where the effects do not cease as a consequence, or where the cause is not definite and removable, the rule “let likes be treated by likes” is the only one promising definite success. If overwork and anxiety; mechanical or chemical irritants; alcohol; injurious occupation, climate or habits; deleterious food, air, or water, or any similar causes are present, every physician's duty is to endeavour to provide against their continuance before prescribing at all. Where the presence of a carious tooth, foreign body, dead bone, or other degenerated tissue, retained secretions or excretions, parasites of any kind, or analogous substances, are the *fons et origo mali*, it may be sufficient that such should be removed. It is in the use or abstension from drugs, and in the manner of their application, that the distinction in practice exists. Rest, mental and moral influences, anæsthetics,

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\* “Macaulay's Essays.”



mechanical expedients, enemata, the knife, and similar agents are the inheritance of the homœopathist as well as of all medical men. Further, in certain simple cases, the homœopathic physician employs the direct action of drugs : where the rapid emptying of the stomach or bowels is necessary he will make use of an emetic or purge, for a temporary stimulant he administers alcohol, to relieve a severe pain a sedative, and so forth ; but he recognises these to be only temporary expedients, relying for the cure upon very different means.

It being granted, then, that the physician's first duty is to search carefully for and wherever possible to remove the cause of the derangement from health, it must next be noticed that, after all, in the daily average of cases the external cause is discoverable in comparatively few, and is capable of being removed in much less, while in a very large proportion, it has been in operation too long to render its mere removal of much service to the patient. Science, in various departments, is continually adding unsuspected causes to the list of those already recognised, and the profession looks forward to much further improvement as a result of the zealous research now-a-days taking place in etiology and pathology. Practically, however, the cause must be simple and definite as well as recognised for its removal to be possible, and in the great majority of cases this is not so. In such cases there is a great tendency for physicians to elaborate a theoretical cause and then to treat this : "The giants first they make, and then they slay them." Diagnosis is one of the first and most important of a physician's duties ; but a large number of the cases constantly coming before him only admit of an approximate diagnosis, and to many no definite name can be given ; in these cases the symptoms present afford little help to the ordinary old-school practitioner ; he has not been taught their meaning, the drugs they indicate or how they are to be dealt with as a whole, beyond the idea that the more prominent or distressing ones are to be stifled ; if he can find no definite name or pathology for the case at hand he must assume one, or, trusting to that absurdity "treatment on general principles," he must wait for a *post-mortem* to show the indications for treatment which he should have been able to read in the symptoms during life.

As a result of each practitioner founding his proceedings upon his own notion of the original cause of the symptoms present, and

upon his idea of the manner in which this hypothetical cause may be removed by drugs or other means, it follows that the same patient would be treated in very different ways by different physicians ; there might be as many methods as doctors consulted if the case were at all intricate. As in Hahnemann's day, so now, the directions for treatment in medical text-books are of the following type : " If A should not answer, try B ; and if this will not do, a choice lies among C, D, E, F, and G ; I have often found H and K of service ; others recommend most highly J and L, and I know some who cannot sufficiently praise M, W, and Z, whilst others extol N, R, and T ; S and X, also, are said to be not bad in this disease. Some German physician recently recommended Q in preference to all others in this affection ; I certainly am inclined to give it a trial." As a consequence, two physicians, seeing the same case, could only rarely, and by accident, prescribe the same drug, whence it follows that at least one could not be the best possible remedy under the circumstances, and might be harmful ; whilst the doctor attempts to knock over the straw man he has erected, there is nothing to prevent the patient suffering from the blows ; the patient may be " removed " during the process of trying to remove a non-existent cause for his troubles. Compare this with the fact that two homœopathic physicians carefully considering the symptoms of the same case would, without collusion, prescribe the same drug for their relief.

If we consider the various ideas of the pathology of inflammation, itself the base of so large a proportion of diseases, we may imagine the variety of " antiphlogistic " treatments which men holding these views of the primary cause will employ.

Diseases are not entities to be sought out and hunted down. However important diagnosis may be in the art of the physician—and we do not minimise the necessity of the detection of the nature of the disease present, for many purposes altogether outside of treatment this is of the greatest consequence—it must be observed that to give a disease a name is neither to describe its origin nor suggest means for its removal.

The absurdities to which the profession has been led by relying on nosological tables, to some department of which each case which occurs is relegated in order that it may be treated as recommended under its class heading, are recorded in medical annals. The pathology which grouped all diseases as sthenic and asthenic,



produced incalculable harm when reduced to practice ; patients were overfed and alcoholised, or starved and depleted, according to which of these classes their doctor included their ailment. The grouping of all cases into the smaller classes of the nosological tables, when used as grounds for routine treatment (hence the term “regular” as applied to the unthinking follower of routine, and as opposed to homœopathists), only does less harm because the greater number of the classes allows of considerably greater differentiation of treatment. The patient, rather than any definite disease, must be treated ; attack the manifestations present in the individual specimen to hand, and not the typical case which ought to be present. As Dr. Gull said of typhoid fever—“the patient has not *got* the fever, he *is* the fever.”

The above-mentioned difference in the view from which disease is regarded, partly accounts for the fact that while the homœopathist's chief boast is that the patient recovered, and his chief object the sick person's cure, other practitioners praise a “brilliant diagnosis,” call names at the disease, and discuss the pathology and probable *post-mortem* appearances : physicians of the former class pride themselves on good results in every-day diseases ; those of the latter discuss, in their societies and journals, interesting and rare cases, such they admit to hospitals for observation, such they devote time and care to, while the immense majority of diseases, from which mankind suffers and dies, are left to the general practitioner, or have comparatively little scientific attention directed to them. The best men, intellectually, in the profession devote their attention to pathology, physiology, anatomy, surgery, and diagnosis ; treatment, the real *raison d'être* of the profession, being only sparingly mentioned or cultivated.

It has been made a common reproach to homœopathy that it is not adopted by the men of scientific eminence in the profession. Vaccination, the transfusion of blood, and other valued agents have in their turn received their chief opposition from our men of light and leading. In this country and on the Continent to avow a belief in homœopathy is to be expelled or debarred from any position where opportunities for scientific research are to any large extent available ; so we may see both why British homœopaths are not commonly distinguished in general scientific research, and why men engaged in such investigations should hesitate to avow a belief in the persecuted faith. Professor Henderson, at one



time Professor of Pathology and Clinical Medicine in the University of Edinburgh, suffered for the faith that was in him; and within the last few years Professor Rapp, of the University of Tübingen, was deprived of the chair of Pathology and Medicine on account of his acknowledged faith in homœopathy. Perchance their fate does not "encourage the others."

It is only in the *materia medica* that the homœopath can be reasonably expected to attain eminence; it was his attention to and study of this branch of medical knowledge which caused him to become a homœopath, after having been disgusted with the chaotic state of the therapeutics taught in his curriculum of study; and his having done so enables him to obtain special experience and make valuable discoveries in practical medicine. In England, the homœopath is shut out from all posts and professorships at the large hospitals and scientific centres, he obtains no Government or public appointments, and so the fields are closed to him in which he might hope to become a famous surgeon, pathologist, or gynæcologist, a pioneer in hygiene, or in sanitary medicine. In America it is not so, and there scientific celebrities are, in very many cases, also homœopaths. In Europe, the homœopath is confined to the special department in which he differs from the so-called "regular" medical man, and here he is "eminent," even in Britain. Drs. Drysdale, Dudgeon, and Sharp (F.R.S.), have earned names in science outside homœopathic literature; Dr. Richard Hughes is an authority all over the world on pharmacology.

Further, homœopathy has a negative value. It is not responsible for active mischief; patients treated by it can never present drug diseases, oftentimes more important than the disorders the said drugs were given to cure. Bromidism, iodism, cinchonism, salicylism, salivation, dental caries, mercurialism, lead or silver staining, and other acute or chronic poisonings, can never arise from its practice, nor can morphia, chloral, opium, alcohol, or other habits, originate from its treatment.

The money wasted for allopathic medication may be imagined when we find that homœopathic hospitals require from two to eight hundred pounds less than other institutions for the endowment of each bed.

The *plagiarism* which has taken place from homœopathy without acknowledgment, would astonish any inquiring student not familiar with the new system. General medicine in its more advanced form is fairly saturated with homœopathy. Before Hahnemann enunciated his law, though medical literature was full of statements which helped to support his conclusions, their full meaning was unrecognised by their narrators; but since Hahnemann's day it cannot be mere coincidence, nor can it be unnoticed

by medical teachers, that the new drugs and new treatments which Ringer, Phillips, Murrell, Lauder Brunton, Bartholow, and their followers have presented to and popularised with the profession, have been familiar to homœopathists for years, and long since announced in their literature. The coincidence is too acute. No doubt they are doing a service to general medicine, and forwarding the day of the general acceptance of Hahnemann's law by introducing crude homœopathy where it might not otherwise penetrate. They have popularised with the profession, mercury for salivation, belladonna for some kinds of sore throat, aconite for some kinds of fever, pulsatilla for amenorrhœa, arsenic for various diseases of the skin, corrosive sublimate for dysentery, bromide of potassium for acne, and so on; drugs which, as their own literature records, in large doses cause in the healthy similar symptoms, and whose action thus illustrates the homœopathic law, while they have been extracted (for the special purposes mentioned) from the homœopathic *materia medica*.

A noticeable feature is that the more modern works and the later editions show increased adaptations from homœopathy, very rarely, however, acknowledged. When Dr. Ringer's book was published, many stood aghast at the medicines and doses recommended; they found calcic sulphide for suppurations, ipecacuhana for vomiting, podophyllum, rhubarb, and castor-oil for diarrhœa, jaborandi for sweating (Ringer's own deduction!), corrosive sublimate for dysentery, and so on; and *The British and Foreign Medico-Chirurgical Review* only voiced the general opinion when, in reviewing the work, it said: "This is nothing more or less than pure homœopathy." The success of Ringerism in practice is renowned. Lauder Brunton, an examiner in *materia medica*, has recently published "A Text-book of Pharmacology, Therapeutics, and Materia Medica," which is one of the most flagrant assimilations of other men's discoveries, without acknowledgment, which literature has ever known. Anyone with some knowledge of homœopathy, who compares this with the treatment in the "Index of Diseases and Remedies" of this work, will perceive how the advance-guard of the profession "goes marching on."

In a pamphlet entitled "At Last," Dr. Dudgeon arranges an immense number of the "unusual therapeutics" of this Index. He shows that numerous drugs are mentioned for various diseases, the authorities for which are omitted because they only occur in homœopathic literature, and points out that homœopathy directs the use of most of the other drugs mentioned, showing where, and where only, the author could have learned their use. Surely the next stage is the reception of Hahnemann's teachings, with drums and hurrahs! Or is it a further midnight march—an



occupation of the remaining outposts of scientific therapeutics? The day approaches when orthodox medicine will have to "dish" homœopathists, though probably till the end it will ridicule and decry the views which it adopts. If, however, instead of considering these advanced writers on therapeutics, we consider the bulk of the profession, the majority of its professors, practitioners, and students, we shall find that miserably defective therapeutics and gross ignorance of the better way are still the rule in medicine.

The relation of students to homœopathy is a reflex of that of their professors, and, therefore, when the student leaves college it is with prejudices against the only form of medical practice on which definite success can be based. Homœopathy is spoken of as such an absurdity and imposition, that its personal examination is not considered necessary. Hahnemann wrote: "When we have to do with an art whose end is the saving of human life, any neglect to make ourselves thorough masters of it becomes a crime." Yet few young medical men ever investigate a system so strongly recommended to them, and few can even state what its principles are. During student life and early practice many become dissatisfied with the methods of treatment with which they have been made acquainted, many become sceptics of the value of their art, many of the best devote their attention to surgery, as affording definite advance and decided beneficial results; others, the time having passed by when homœopathy could have been best studied and tested, develop into members of the bigoted class, who, because they are blind, declare there is no light. They may deeply regret their helplessness but refuse the help offered, they weep for their ill success and refuse to be comforted. We believe homœopathy is never fairly investigated without being adopted; it must, however, be approached in a fair spirit, and not in the mood of the man who was open to conviction, but only asked to be shown the man who could convince him.

It must be confessed that most general *practitioners* know nothing about homœopathy, except that it is reported to be nonsense, and its followers ignorant, deceiving, or deceived. They may be acquainted with caricatures of its practice and principles they may even have glanced at some of its literature, and have been repelled by the non-essential nomenclature for a few of the drugs. As a rule, however, they prejudge the issue, and attribute the cures which are forced on their observation to other causes. Nowadays it is the mediocre, and especially the country practitioner, who delights in the crusade against the new system, and it is to satisfy this constituency that consultants, surgeons, specialists, and journals, join in a *persecution* of which many of them secretly express their abhorrence.

As suggested by the title of this essay, the majority of the pro-



fession has acted towards homœopathy as if it were a moral heresy, and as though the teachings they have adopted were infallible. The members of this majority have wounded liberty in defending what they consider truth. The terms *orthodoxy*, *heterodoxy*, *heresy*, and *excommunication*, show the point of view from which the minority are regarded by their brethren in medicine, and just as churches have treated truths they did not approve of, so has this medical orthodoxy damned the new system. *The Lancet* constantly employs these terms, and in the volume for 1846, we read "that the true labour of young physic is to introduce an orthodox spirit in the place of the prevalent lapsarianism of the day." It is not necessary to do more than allude to the *persecution* homœopathy undergoes and has undergone. It is well known to the public as well as to the profession that homœopaths and homœopathy are boycotted in general medical journals and institutions, in societies and society; that those medical men who openly avow their faith in homœopathy are debarred from all public appointments and professional consultations. Instances of this are of daily occurrence; the writer has just had his subscription refused to the medical institution of his native city, of which he has for years been a member, on the ground that he practises homœopathically. The council have been aware of his having done so for years, but probably they now despair of his repentance and have furbished up a bye-law by which they have the power to cast the erring sheep from the fold his presence contaminates. It is only the authority of the law which prevents many examining bodies from insisting on a creed, a test act in its vilest form, a declaration that their graduates should have the intolerance or the deception to promise never to practise homœopathy; they cannot and they dare not imitate the persecution which Dr. Pope (to whom homœopathy owes so much) suffered in times past. There is not liberty even amongst the oppressors themselves, individual opinion as to the manner in which members of the new school shall be met is bound by resolutions and bye-laws which are a disgrace to a profession calling itself liberal. A fair-minded physician is intimidated and threatened into open hostility, though secretly he may express his disgust at such inquisition.

The terms orthodoxy, heterodoxy, heresy, excommunication, inquisition, and so forth, suggest the Roman Catholic Church! She, however, considered herself the possessor of eternal truth, and believed those outside her pale would be lost, unless persecuted into acquiescence. The medical profession claims no such possession; it exercises the same intolerance, without the same excuse. Even so, we notice that the Roman Catholic Church made use of the zeal of all her servants, even of those who taught

much with which she did not sympathise, and gained much knowledge and power by their efforts. The medicine in authority has adopted the less wise plan of casting out its most zealous pioneers in the realm of therapeutics, and has thereby suffered in progress and prestige. It is now tardily accepting their discoveries, while it leaves its ban upon the workers. The wrath of the profession has been poured upon the "name of the new school, the "trade designation," as they have the audacity to call it. This is the red herring trailed across the scent. The name was made the badge of a sect, and of a persecuted sect, by the general profession. The reversal of time-honoured traditions of treatment and dose were the original reasons for the oppression. Now that these are proving "worthy of all acceptance," we are told that a renunciation of the distinctive title will be accepted as a peace-offering. They maltreat us, and *we* are to apologise! *Que messieurs les assassins commencent.* Vested interests and medical intolerance have stimulated the persecution which Hahnemann and his followers have suffered. Truth may gain thereby in the long run; she cannot be crushed out. Persecuted faiths live and spread, and the feeling of brotherhood in a great trust, that of the true method of combating disease, has led each member to help zealously to keep the light burning until the day of universal acceptance shall dawn, the night of ignorance and bigotry pass away, and Hahnemann receive his true position in the world's temple of fame. The virulence of the persecution is often in direct ratio to the value of the discovery, and Hahnemann suffers in good company. The medical profession persecuted Harvey and Jenner; science hounded the Church against Galileo.

The personal sufferings of her votaries are, broadly regarded, necessary in the early spread of a new truth. The blood of martyrs was the seed of the Church; to posterity our sufferings will appear trivial in comparison with the value of the truth we possessed and declared. If by the confession of a belief in the reign of law in medicine the conscientious physician must suffer loss of friends and fame, if he be refused *in dubiis libertas, in omnibus charitas*, he can possess his soul in patience until the "joy which cometh in the morning," if not to him at least to the art he values and the profession he loves: though he regrets that a matter of scientific opinion should be made subject for moral condemnation; though he sorrow for the loss of many a professional friendship—*Amicus Plato sed magis amica Veritas*



# APPENDIX.

By G. A. CROSS,

*Secretary of the*

LONDON HOMŒOPATHIC HOSPITAL,  
MEDICAL SCHOOL, AND NURSING INSTITUTE.

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IN the foregoing pages allusion has been made to the exclusion of homœopathy and homœopathic physicians from hospitals and public appointments. There is, however, one hospital in the metropolis where the principles of medical practice inaugurated by Hahnemann have been in constant practice for the past thirty-five years. Few charitable institutions are better known, and there are none where the professional inquirer or benevolent visitor can receive a more cordial welcome. Some brief account of this institution—the London Homœopathic Hospital—may therefore fittingly follow an essay designed to lead up to the adoption of higher remedial principles.

Founded in the year 1849 by the English Homœopathic Association, a society of laymen associated for the purpose of disseminating among the public a knowledge of the truths and advantages of Homœopathy, its beginnings were necessarily small. Its progress has, however, been unceasing, until at the present date it takes an undisputed position among the hospitals of the metropolis. Its present capacity is ninety-four beds. During the thirty-five years of its history it has received, either as in or out-patients, over 200,000 persons, suffering from diseases of every variety and degree of severity, with a success evidenced by the results published in its annual reports.

In connection with a critical period of the history of London hospitals, the London Homœopathic Hospital stands out in peculiar and favourable relief. In the year 1854 an epidemic of cholera ravaged the city of London. Twenty-two years before it had sprung suddenly upon a profession utterly unprepared to deal with it, and destitute of a principle to guide them in casting about for the best defence against the new foe. In 1849 it was found that their experience had not taught them much. In 1854 they had still to search among their record of cases an agreement as to the best way out of their perplexities. Meanwhile the homœopathic section of the profession, relying upon the principle which directs them to seek for medicines capable of producing physiological phenomena similar to those exhibited by



the disease, had never been in doubt. Hahnemann, on receiving a detailed description of the stages of the disease from a disciple who sought his guidance, had, without seeing a case, but relying solely on his law of drug selection, prescribed a course of remedies which, alike in 1832, 1849, and 1854, proved pre-eminently successful, and which to the present day is the treatment mainly relied upon by homœopathic practitioners. Thus fortified, the homœopaths did not evade the cholera attack of 1854. The small hospital premises in Golden-square—the centre of infection—were thrown open to cholera patients. The number of cases admitted was 61, not less than 36 reaching the state of collapse. Of the 61 patients only 10 were lost, a death-rate of only 16·4 per cent; while under the best allopathic treatment reported to the Board of Health the losses under the most successful method were 36 per cent., and in the least successful 46 per cent. The cases were carefully differentiated from choleraic diarrhœa, of which 126 were admitted as in- or out-patients, with the result of only one death, and from simple diarrhœa, of which 205 cases were admitted, showing no deaths. Dr. Macloughlin, one of the medical inspectors appointed by the General Board of Health, visited the wards, and examined and watched the progress of the cases there treated. His statement, addressed to a member of the medical staff, was as follows:—

“You are aware that I went to your hospital prepossessed against the homœopathic system, that you had in me in your camp an enemy rather than a friend . . . and I need not tell you that I have taken some pains to make myself acquainted with the rise, progress, and medical treatment of cholera, and that I claim for myself some right to be able to recognise the disease, and to know something of what the medical treatment ought to be, and that there may, therefore, be no misapprehension about the cases I saw in your hospital, I will add that, *all I saw were true cases of cholera, in the various stages of the disease*, and that I saw several cases which did well under your treatment, which I have no hesitation in saying *would have sunk under any other*. In conclusion, I must repeat to you what I have already told you, and what I have told every one with whom I have conversed, that although an allopath by principle, education, and practice, yet was it the will of Providence to afflict me with cholera, and deprive me of the power of prescribing for myself, I would rather be in the hands of a homœopathic than an allopathic adviser.”

Dr. Macloughlin, as shown by his researches and publications, was undoubtedly well informed as to the identity of cholera.

Now, a circular was addressed by the President of the Board of Health to various Metropolitan Hospitals and to qualified practitioners, requesting returns of cholera cases, with details of the circumstances, treatment, and results. The object was to determine by comparison, for the public good, what experience showed to be the best treatment of the new plague. Returns were sent in from the Homœopathic Hospital giving the names and addresses of the patients treated, the symptoms, remedies, and result in each case, and a summary of those results. The object of the inquiry

was to determine by results the most successful method of practice. This was not a question of theory, or of any particular school ; it was a question of facts and statistics affecting the public health. But the Report of the Board of Health was presented to Parliament without the slightest reference to the Homœopathic Hospital, or the brilliant results which its physicians had achieved by undaunted self-sacrifice in a time of great public calamity. Complaint was, of course, made to the Board, and duly referred to its Medical Committee, with the result that the Board received from the committee a resolution, which, for ingenuity of disingenuousness and illiberality, has hardly ever been equalled. It was this—

“ That by introducing the returns of homœopathic practitioners they (the Treatment Committee) would not only compromise the value and utility of their averages of cure, as deduced from the operation of known remedies, but they would give an unjustifiable sanction to an empirical practice, alike opposed to the maintenance of truth and to the progress of science.”

The remedies un-“known” to the Treatment Committee were such as camphor, copper, hellebore, arsenic, and other drugs *well known* to medicine ; it was their bounden duty to “compromise” the averages of old methods by more successful new methods in their search for the best results ; the interference with empirical practice was no part of the statistical duty before them ; and the “progress of science” was *de facto* obstructed by their refusal to “compromise” their averages by a factor which contained the very object of their search. The perversity was too plain. A motion was made before the House of Commons, which, more anxious for the “progress of science” and the “value and utility of averages,” than for “the operation of known remedies,” to say nothing of its great duty to the people it represented, forthwith ordered a Special Return of the ignored homœopathic statistics, which was in due course made by the Board of Health, and which remains to this day, among Parliamentary Papers, a standing monument of the obduracy of a traditional policy.

Three things have been demonstrated by the success of the London Homœopathic Hospital. The first is, that the faith of the public has every year increased in the efficacy of the methods pursued in its wards. The second is, that its existence for thirty-five years is an irrefragable proof that the system adopted by its medical staff is not fallacious in principle. No mere delusion could stand so long a test, nor go on progressing in public credence and support. The third is, that, notwithstanding the undoubted success and popularity of the hospital, and the growing confidence of the giving and the receiving public in the value of its work, it is as far from medical recognition as if it had no record of successful practice, and as if thousands of patients in all parts of the kingdom were not ready to attest the benefits they have



received within its walls. This singular attitude is not adopted because the truth of homœopathy or the reality of the work of the hospital are any longer doubted. Neither of these facts are any longer seriously denied. But matters medical move according to tradition. The traditional policy of medicine is merely to *refuse inquiry* into Homœopathy. To avowedly renounce homœopathy and all its works is a medical shibboleth, perfectly senseless, perfectly insincere, but rigidly imperative. The vigour of a traditional policy, however erroneous, as a motive power in human affairs, has often been exemplified; but in few things so curiously as in the treatment of a munificent offer made some years ago by a generous lady, through a physician practising homœopathy, Dr. Wilson. This offer was to maintain fifty-one patients in any hospital, on condition that they should be placed under Dr. Wilson to demonstrate the practical value of the homœopathic method. In the event of success the lady promised to endow thirty-one beds in the hospital consenting to this fair and liberal-minded offer. Now, although homœopathy is true, the leaders of medicine had decided, *à priori*, that it must not be inquired into, and their brethren at the hospital could not go against the tradition. *The offer was declined by seven hospitals in succession.* The medical profession was in the position of the man who knew the world did not go round because he had never seen it move. But that was some years ago. To come to a later date: in the spring of 1883 a leading article appeared in *The Times*, lamenting the deplorable want of funds at St. George's Hospital, and calling attention to a meeting to be held at Grosvenor House to devise means for the maintenance of the hospital work. The Treasurer of the London Homœopathic Hospital, Major William Vaughan Morgan, reading this article, telegraphed to the chairman of that meeting, offering to subscribe £1,000 a year for five years, if the sum should be voted to beds set aside for the homœopathic treatment of patients. This munificent offer was *not even acknowledged*, though it was made the subject of invective in the leading medical journal.

To understand the perverseness of this obduracy, it must be remembered that *the system of treatment in question is practised with success in hospitals all over the world.*

Not only is there a Homœopathic Hospital in London; there is one in Liverpool, one in Bath, one in Birmingham, to say nothing of the innumerable dispensaries in all parts of the kingdom. Looking abroad, there are three in Buda-Pesth, two in Paris, three in Vienna, one in Lyons, Genoa, Baden, Madrid, Linz, Leipsic, Brün, Gyöngyös in Hungary, and other continental towns.



In the University of Pesth, homœopathy is taught with the usual subjects. In Melbourne there is a Homœopathic Hospital partly supported by a public grant. But when we turn to America, where the people can hardly be regarded as visionary or unpractical, we get a startling result. America is a comparatively new country. In the progress of its institutions and its associations, no old traditions, no obstructive prejudices had to be cleared away. Consequently the science of homœopathy may be said to have received in America a measure of fair play, apparently impossible in any other country. The result is a splendid testimony to its real value. The American hospitals receive large aid, both from private donations and from State subventions. Among the latter is the assignment to homœopathy of the Westborough Insane Asylum, with 180,000 dollars for its equipment. The State Homœopathic Asylum at Middleton, N.Y., is brilliantly successful. A similar assignment has been made in the Cook County Hospital at Chicago. Providence, Washington, and Pittsburgh have corresponding liberality to record from the authorities of their respective States; and the Hahnemann Medical College and Hospital of Philadelphia, the oldest institution of its kind in the country, is about to take possession of a new and thoroughly equipped building. Thus in New York there are three hospitals (two having colleges): there is one with college attached in Chicago, Boston, Pittsburg, Michigan, Cleveland, Cincinnati, Philadelphia, San Francisco, and St. Louis. In addition, homœopathic hospitals are in course of foundation in Lowell, Mass., Providence, R.I., Washington, D.C. (with a Government grant). From the State subsidies to homœopathic hospitals it follows that homœopathic medical practitioners receive their share of State appointments. A recent search has shown that in America there are 10,000 Homœopathic practitioners, with a following of 11,000,000 patients; 15 medical colleges, having 1,000 students, and 400 graduates yearly; there are 51 hospitals, with an aggregate capacity of 4,000 beds, and 29,000 patients annually; there are three insane asylums, and 48 dispensaries, having over 150,000 patients annually; there are 143 societies for the study of the science, and 22 journals for its dissemination and advancement. It is a noteworthy fact that in the United States some Insurance Companies require a lower premium from insurers who when sick are accustomed to place themselves under homœopathic physicians. Yet a public test for which the homœopathists are willing to pay and a recognition such as is established abroad, appears at present impossible in England; and this in face of the facts that practically the principles of homœopathy are being largely engrafted on the practice of all sections of the profession, and that, putting aside the gratuitous and undeserved ridicule showered

upon "the small dose" (itself significantly modifying the traditional practice), the truth of the homœopathic law has never been refuted.

On those who are content to have their thinking done for them new facts and reasonings are thrown away. It is hoped that there are others, who, after the progress of homœopathy for half a century, after its acceptance by many of the highest minds of the present day, after its gradual but constant drafting into the new therapeutics of the older school, will admit to themselves that it is worth inquiry. Especially is this hoped of the younger men in the profession, and the student yet feeling his way to success in the great object of his science. To the young practitioner and the student it is important to start right. Let such visit the Homœopathic Hospital in Great Ormond-street, watch its treatment, examine into its cases, test its results, with an open and candid mind and a sincere desire to arrive at truth. He will find himself in the midst of brethren on the medical staff not only taught in the learning of the ordinary medical schools, but possessing a method of studying *Materia Medica*, and a law of therapeutics, which it is of the utmost consequence to him that he should acquire.

There are others into whose hands this Essay will fall : those who are able and willing to subscribe to charities for the relief of the afflictions of the poor. Altogether apart from the value of the London Homœopathic Hospital as an old-standing testimony to medical truth, it is constantly doing a great and widespread work among the needy sick. It has 750 in-patients, and nearly 9,000 out-patients every year. This extensive and ever-extending work is not done without adequate expense. Many generous friends of homœopathy support the hospital by liberal contributions. But it is indispensable that the number should be recruited and increased. To the lay reader, therefore, the invitation is extended to visit the hospital in Great Ormond-street, and see the benevolent work being daily done within its walls, and, by its annual reports, to satisfy himself as to the care and economy of its management, and the practical value of its medical results.

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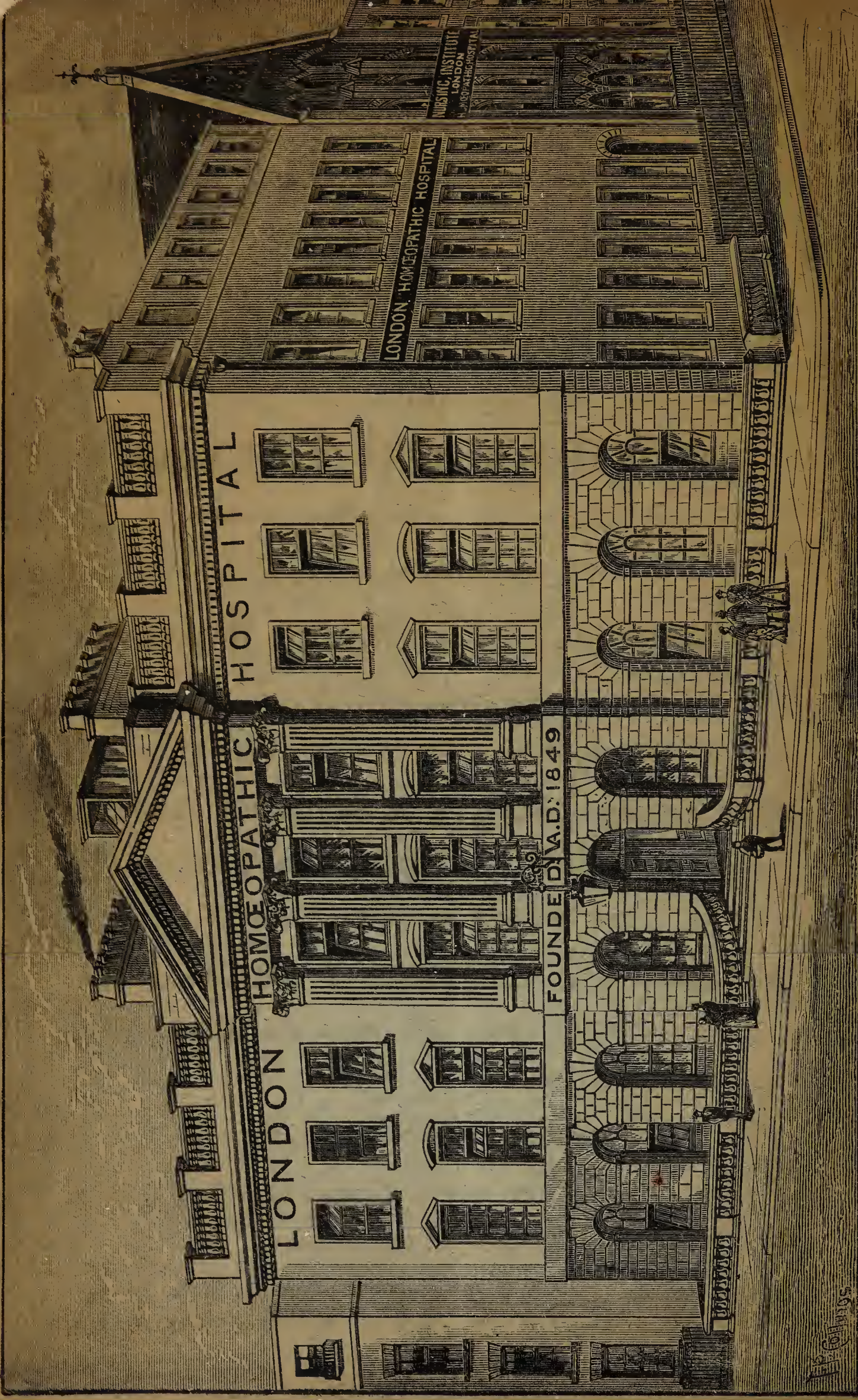
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